

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of:

FANG FANG

Serial No.: 09/555,446

Filed: AUGUST 16, 2000

Title: MULTIVALENT RECOMBINANT  
ANTIBODIES FOR TREATING HRV  
INFECTIONS

) Group Art Unit: To be assigned

) Examiner: To be assigned

Certificate of Express Mailing

) I hereby certify that this correspondence and all marked  
) attachments are being deposited with the United States  
) Postal Service as "Express Mail" in an envelope  
) addressed to Honorable Commissioner of  
) Patents and Trademarks, Mail Stop Petition  
) Box 1450, Alexandria, VA 22313-1450  
) on August 18, 2003.

Suzanne Lloyd Simpson

PETITION TO REVIVE UNINTENTIONALLY ABANDONED  
APPLICATION UNDER 37 C.F.R. §1.137(b)

Honorable Commissioner of  
Patents and Trademarks  
Mail Stop Petition  
Box 1450  
Alexandria, VA 22313-1450

RECEIVED

AUG 25 2003

OFFICE OF PETITIONS

Sir:

The above-identified application became abandoned for failure to timely file a response within the statutory period of six months from the mailing date of the Office Communication mailed on December 5, 2001.

Applicants hereby petition for revival of this application. Pursuant to 37 C.F.R. § 1.137(b), the following items are filed herewith:

- (1) Petition fee under 37 CFR § 1.17(m);
- (2) Reply/Amendment/Letter Transmittal;
- (3) Response to Office Action;
- (4) Petition and Response fee; and
- (5) Return postcard.

08/21/2003 HUN0061 00000038 502212 09555446  
01 FC:2453 650.00 DA  
02 FC:2255 985.00 DA

Applicants note that no terminal disclaimer is required because this application was filed after June 8, 1995.

Applicants hereby state that the entire delay in filing the required reply from the due date for the reply until the filing of a grantable petition under 37 C.F.R. § 1.137(b) was unintentional.

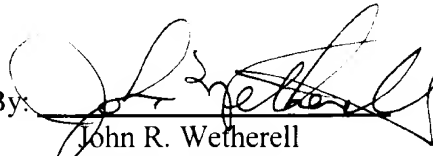
In view of the above, Applicants submit that all of the requirements of 37 C.F.R. § 1.137(b) have been met. Therefore, Applicants respectfully request that this petition be granted. Favorable action on the merits is also earnestly solicited.

Please charge our deposit account in the amount of \$1,635.00, which includes the extensions of time fee and Petition to Review filing fee. If the fee submitted is incorrect or if any other fees are due in connection with this submission, please charge any such fee or credit any overpayment to Deposit Account No. 50-2212, Order No. **014357-0278749**.

If questions arise relating to this petition, the Examiner is hereby invited to contact the undersigned to discuss the same.

Respectfully submitted,

PILLSBURY WINTHROP LLP

By: 

John R. Wetherell  
Registration No. 31,678  
Tel.: (858) 509-4022  
Fax: (858) 509-4010

RECEIVED

AUG 25 2004

OFFICE OF PETITIONS

Attorney Ref. No.: 014357-0278749

PILLSBURY WINTHROP LLP  
11682 El Camino Real, Suite 200  
San Diego, CA 92130-2593

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND                         |                                   |   |              |          |   |   |    |   |   |   |
|---|-----------------------------------|---|--------------|----------|---|---|----|---|---|---|
| 1 Date of Request: <u>11/26/03</u>                    |                                   | 2 Serial/Patent # <u>69555, 6966</u>  |              |          |   |   |    |   |   |   |
| 3 Please refund the following fee(s):                 |                                   | 4 PAPER NUMBER  | 5 DATE FILED | 6 AMOUNT |   |   |    |   |   |   |
|   | Filing                            |   |              | \$       |   |   |    |   |   |   |
|   | Amendment                         |   |              | \$       |   |   |    |   |   |   |
|   | Extension of Time                 | #14   | 9/19/03      | \$ 975   |   |   |    |   |   |   |
|   | Notice of Appeal/Appeal           |   |              | \$       |   |   |    |   |   |   |
|   | Petition                          |   |              | \$       |   |   |    |   |   |   |
|   | Issue                             |   |              | \$       |   |   |    |   |   |   |
|   | Cert of Correction/Terminal Disc. |   |              | \$       |   |   |    |   |   |   |
|   | Maintenance                       |   |              | \$       |   |   |    |   |   |   |
|   | Assignment                        |   |              | \$       |   |   |    |   |   |   |
|   | Other                             |   |              | \$       |   |   |    |   |   |   |
|   |                                   | 7 TOTAL AMOUNT OF REFUND  |              | \$ 975   |   |   |    |   |   |   |
| 10 REASON:  |                                   | 8 TO BE REFUNDED BY:  |              |          |   |   |    |   |   |   |
|   | Overpayment                       | Treasury Check  |              |          |   |   |    |   |   |   |
|   | Duplicate Payment                 | Credit Deposit A/C #:   |              |          |   |   |    |   |   |   |
|   | No Fee Due (Explanation):         | 9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td>5</td><td>0</td><td>--</td><td>2</td><td>1</td><td>0</td> </tr> </table> |              |          | 5 | 0 | -- | 2 | 1 | 0 |
| 5   | 0                                 | --  | 2            | 1        | 0 |   |    |   |   |   |
|   |                                   |   |              |          |   |   |    |   |   |   |
|   |                                   |   |              |          |   |   |    |   |   |   |
|   |                                   |   |              |          |   |   |    |   |   |   |
| 11 REFUND REQUESTED BY:                               |                                   |   |              |          |   |   |    |   |   |   |
| TYPED/PRINTED NAME: _____                             |                                   | TITLE: <u>1st</u>   |              |          |   |   |    |   |   |   |
| SIGNATURE: <u>[Signature]</u>                         |                                   | PHONE: _____  |              |          |   |   |    |   |   |   |
| OFFICE: _____   |                                   |   |              |          |   |   |    |   |   |   |
| ***** THIS SPACE RESERVED FOR FINANCE USE ONLY: ***** |                                   |   |              |          |   |   |    |   |   |   |
| APPROVED: <u>[Signature]</u>                          |                                   | DATE: <u>9/29/03</u>  |              |          |   |   |    |   |   |   |

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*